



# IDAHO DEPARTMENT OF HEALTH & WELFARE

## Personal Assistance Agency (PAA) Services

\*\* Please see separate fee tables for Residential Assisted Living Facility, Certified Family Home (A&D/PCS), and other Aged and Disabled Waiver service provider rates\*\*

Procedure Code	Modifier	Description	Allowed Amount
<b>G9001</b>		Coordinated Care Fee – Initial (Agency) (1 unit = 1 visit)	\$99.04
<b>G9002</b>		RN Care Plan Development and Placement (Initial–10 units, Redetermination–5 units) (1 unit = 15mins)	\$10.19
<b>H2020</b>		Therapeutic Behavioral Services (Agency) (1 unit = 1 day)	\$31.97
<b>S5115</b>		Consultation (1 unit = 15 min)	\$7.65
<b>S5120</b>		Chore Services (1 unit = 15 min)	\$4.01
<b>S5125</b>		Attendant Care Services (1 unit = 15mins)	\$4.49
<b>S5130</b>		Homemaker Services (1 unit = 15mins)	\$4.16
<b>S5135</b>		Companion Services (1 unit = 15 min)	\$4.16
<b>S5160</b>		PERS Install/1st month rent (one-time only)	\$56.89
<b>S5161</b>		PERS Rent (1 unit = 1 month)	\$33.83
<b>T1001</b>		Nursing Assessment/Evaluation (Agency) (1 unit = 1 visit)	\$50.95
<b>T1002</b>		Nursing Services RN (RN services up to 15 min) (1 unit = 15mins)	\$10.19
<b>T1003</b>		Nursing Services LPN (LPN/LVN services up to 15 min) (1 unit = 15mins)	\$7.31
<b>T1005</b>		Respite (1 unit = 15 min)	\$4.16
<b>T1013</b>		Oral Interpretation Service (1 unit = 15 min)	\$3.04
<b>T1013</b>	CG	Sign Language Interpretation Service (1 unit = 15 min)	\$12.50
<b>T1019</b>		Personal Care Services (1 unit = 15 mins)	\$4.49
<b>T1019</b>		<b>PCS Family Alternate Care Home</b> (1 unit = 15 min)	\$3.36

If you have any questions regarding these rates please contact Lourie Neal, Office of Reimbursement, Idaho Division of Medicaid, at (208) 287-1162.

Thank you for your continued participation in the Idaho Medicaid Program.